



# KHANYISANI



# Enrolment Form



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You must fill this form in if you, as a parent/guardian, want your child to attend/ use the centre's services and if you fully understand, have agreed to, and signed the centre's Prospectus.



\_\_\_\_\_ ENROLMENT FORM FOR THE FOLLOWING SCHOOL YEAR: \_\_\_\_\_

We kindly ask parents/guardians to read this form carefully and fill in ALL the empty lines. If a section does not apply to you or the child, please write "none." Please ask centre management for help if there is something you are not sure of.

**PART 1: CHILD'S INFORMATION**

1. Name and Surname: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. ID No: \_\_\_\_\_
4. Gender (male or female): \_\_\_\_\_
5. Nationality (which country was the child born in): \_\_\_\_\_
6. Age: \_\_\_\_\_
7. Home Language: \_\_\_\_\_
8. Hobbies (what does the child like to do in his or her free time): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Disabilities, if any: \_\_\_\_\_



10. Allergies, if any: \_\_\_\_\_

11. School or Centre currently attending if any: \_\_\_\_\_

12. Grade: \_\_\_\_\_

13. Is the child a Government Social Grant recipient? \_\_\_\_\_

If yes, which grant does he or she receive? \_\_\_\_\_



## PART 2: GUARDIAN'S INFORMATION

1. Name and Surname: \_\_\_\_\_
2. Relationship with the child (mother/father/guardian/foster parent):  
\_\_\_\_\_
3. Nationality (in which country were you born?): \_\_\_\_\_
4. ID No: \_\_\_\_\_
5. Age: \_\_\_\_\_
6. Employment Status (are you working yes/no?): \_\_\_\_\_

If employed, name the employer and write the physical address where you carry out this employment:

\_\_\_\_\_

7. Income per month: \_\_\_\_\_
8. Marital Status (are you married): \_\_\_\_\_
9. Physical Address: \_\_\_\_\_
10. Cell Phone No: \_\_\_\_\_
11. Payment of Fees: I, \_\_\_\_\_ (parent/guardian), agree to pay/agree to pay a portion of / cannot afford to pay (circle the relevant answer):

- 11.1 \_\_\_\_\_ per month for a period of 12 months for the child's attendance at the centre. (Please ask centre management to help you complete this section – centre management to refer to the Prospectus for fee calculations).

Centre management and parents/guardians must please complete and sign the ChildVision Centre of Excellence Family Employment Contract if they cannot pay centre fees every month.



11.1.1 I agree to pay these fees in full by the 1st of every month OR

11.1.2 I agree to pay the fees in full by \_\_\_\_\_ (Date) of each month.

OR

11.1.3 Agree to pay a portion of the fees by the \_\_\_\_\_ day of each month.

OR

11.2 Work at the centre as an employee for \_\_\_\_\_ (hours) each month at \_\_\_\_\_ (Rate/Credits) per hour to contribute toward the full monthly fees or a portion thereof. (Please ask centre management to help you complete this section).



12. I understand that, unless otherwise agreed on in a signed contract, I will earn credits instead of South African rands, with one credit equalling one South African rand. These credits will be accepted by the centre as fees for centre services.

**Circle:** Yes / No

13. I know that, as a parent/guardian, I am required to join a Village Savings and Loan Association group to save and learn about income-generating opportunities to help improve my income . I also understand that I must participate in the governance of the centre to help it reach its goals.

**Circle:** Yes / No

14. I know that the centre and all centre staff, parents/guardians, and other adults who enter the centre must strictly follow the centre's Child Protection Policy as well as all of the South African Child Protection Act.

**Circle:** Yes / No

Please tick the boxes to confirm that the following documents are handed in with this form:

- Child's Road to Health Book
- Birth Certificate/ID Copy
- Parent/Guardian's ID Copy
- Signed Prospectus
- Signed Family Employment Contract (if applicable)
- Signed Enrolment Form

**\*Please meet with the centre owner or centre manager if you do not have any of the above documents.**



Signature of parent/guardian \_\_\_\_\_ at

\_\_\_\_\_ (Place)

Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

Signature of Centre Representative \_\_\_\_\_

Capacity \_\_\_\_\_

Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_



## Isaiah 54:13

All your children shall be taught by the Lord, and great  
shall be the peace of your children.



[www.childvision.co.za](http://www.childvision.co.za)

[www.africanhoneybee.co.za](http://www.africanhoneybee.co.za)